IN THE UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Udonsi Olugu Kalu

8202 Almera Falls Drive Cypress, TX 77433 CHAPTER 13

CASE NO. 20-33644-H4

DEBTOR

NOTICE OF HEARING REGARDING (1) CONFIRMATION OF PROPOSED CHAPTER 13 PLAN, (2) VALUATION OF COLLATERAL, (3) DISMISSAL OF CHAPTER 13 BANKRUPTCY CASE, (4) CONVERSION OF CHAPTER 13 CASE, AND (5) ENTRY OF OTHER ORDERS CONCERNING ADMINISTRATION OF CASE

The United States Bankruptcy Court will conduct a hearing on whether (1) to confirm the debtor(s) proposed bankruptcy plan, (2) dismiss this case, (3) convert this case under chapter 7, and/or (4) to enter other orders concerning the administration of this case. The hearing will take place on October 19, 2020 at 10:00 am at U.S. Bankruptcy Court, 515 Rusk, Room 401, 4th Floor, Houston, TX 77002-0000.

Attached to this notice is a copy of the statistical cover sheet submitted by the debtor(s) with their proposed plan. This cover sheet serves as a summary of the plan. A complete copy of the proposed plan is available from clerk of the Court or the Debtor(s) Attorney. The Court may consider the current plan or a modified plan at the confirmation hearing.

If you object to confirmation of the plan, you must file your objection at least seven days before the confirmation hearing and serve a copy of the objection on the debtor, the debtor(s) counsel, the Chapter 13 Trustee, and parties requesting notice.

If the plan is not confirmed, the Court may consider whether to dismiss this chapter 13 case due to unreasonable delay that is prejudicial to creditors. The Court may also consider whether the case should be converted to a case under chapter 7 of the Bankruptcy Code.

The Court may also consider whether to enter other orders that are appropriate for administration of this case.

Dated: 08/12/2020

/s/ David G. Peake

DA VID G. PEAKE, TRUSTEE ADMISSIONS ID NO. 15679500 9660 HILLCROFT, STE 430 HOUSTON, TX 77096 (713)283-5400

Exhibit "A" Plan Summary for Proposed Plan

Disposable Income and Plan Payments

(A) Projected Schedule "I" Income (From most recently filed Schedule I)	(B) Projected Schedule "J" Expenses (From most recently filed Schedule	(C) Projected Disposable Income (Column A minus Column B)	(D) Payment Amount to Trustee	(E) Beg. Month #*	(F) Ending Month #	Paymen Benefit o	G) ts for the f Creditors Reserves**	(H Savings Depo Establishe Plan (Co minus Co	Fund*** osits ed Under olumn D	(I) Total Monthly Trustee Payments (Column D multiplied by number of months paid)
"	J)					Per Month	Total	Per Month	Total	paidy
\$5,686.85	\$5,301.56	\$385.29	\$385.00	1: 08/20	19: 02/22	\$385.00	\$7,315.00	\$0.00	\$0.00	\$7,315.00
			\$1,265.00	20: 03/22	60: 07/25	\$1,265.00	\$51,865.00	\$0.00	\$0.00	\$51,865.00
				Gra	and Total		\$59,180.00		\$0.00	\$59,180.00
			Less I	Posted Ch Truste	napter 13 e Fee****		\$3,521.36			
				Net /	Available		\$55,658.64			

^{*} This is the month in which the first payment is due for this amount. The Debtor(s) must commence payments not later than 30 days after the petition date.

^{**} Reserves are established under Paragraph 23 of the Plan.

^{***} Savings funds are funds established under Paragraph 22 of the Plan.

^{****} The Posted Chapter 13 Trustee Fee is based on the percentage listed on the Court's website.

Projected Trustee Disbursements to Secured Creditors

Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month#	Total
Citibank North America	\$3,030.00					
Laptop Computer						
Treated under Plan Section: 7						
Check One: ☑ Surrendered ☐ Transferred	d ☐ Retained (_I	paid direct)	☐ Retained (paid through	Trustee)*	
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim						
Monthly Refinance Payment (¶ 8B)						
Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month#	Total
SG Owners Association, Inc. 8202 Almera Falls Dr., Cypress, TX 77433 Treated under Plan Section: 8A						
Check One: ☐ Surrendered ☐ Transferred	d ☐ Retained (_I	paid direct)	☑ Retained (oaid through	Trustee)*	
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim	\$8,584.87	5.00%	Pro-Rata	1	56	\$9,917.35
Monthly Refinance Payment (¶ 8B)						
Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month#	Total
Chase Mortgage 8202 Almera Falls Dr., Cypress, TX 77433 Treated under Plan Section: 10	\$162,796.00					
Check One: ☐ Surrendered ☐ Transferred	d ☑ Retained (_I	paid direct)	☐ Retained (oaid through	Trustee)*	
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim						
Monthly Refinance Payment (¶ 8B)						

Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month#	Total
US Bank	\$12,422.00					
2015 Jeep Grand Cherokee Treated under Plan Section: 10						
Check One: ☐ Surrendered ☐ Transferre	d ☑ Retained (_I	paid direct)	☐ Retained (paid through	Trustee)*	
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim						
Monthly Refinance Payment (¶ 8B)						
Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month#	Total
Volkswagen Credit, Inc 2015 Volkswagon Jetta Treated under Plan Section: 10	\$6,172.00					
	d T Deteined (i - l - lin + \	Dotoin and (: - ! 4 -	. T	
-	d ☑ Retained (_l	paid direct)	Retained (paid through I	Trustee)"	
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim						
Monthly Refinance Payment (¶ 8B)	<u> </u>			_		
Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month #	Total
BMO Harris Bank, N.A. Wabash Trailer Treated under Plan Section: 11						
Check One: ☐ Surrendered ☐ Transferre	d ☐ Retained (_I	oaid direct)	☑ Retained (paid through	Trustee)*	
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim	\$10,000.00	5.00%	Pro-Rata	1	56	\$6,931.27
Monthly Refinance Payment (¶ 8B)						
Name of Holder /	Claim	Plan Int.	Monthly Payment	Starting Month #	Ending Month#	Total
Description of Collateral		Rate	Amount			
Cypress Fairbanks ISD 2017 Wabash Trailer (Business Property) Treated under Plan Section: 11			•			
Cypress Fairbanks ISD 2017 Wabash Trailer (Business Property)	d	Rate	Amount			
Cypress Fairbanks ISD 2017 Wabash Trailer (Business Property) Treated under Plan Section: 11	d	Rate	Amount			
Cypress Fairbanks ISD 2017 Wabash Trailer (Business Property) Treated under Plan Section: 11 Check One: Surrendered Transferre	d	Rate	Amount			
Cypress Fairbanks ISD 2017 Wabash Trailer (Business Property) Treated under Plan Section: 11 Check One: Surrendered Transferre Cure Claim	d	Rate	Amount			
Cypress Fairbanks ISD 2017 Wabash Trailer (Business Property) Treated under Plan Section: 11 Check One: Surrendered Transferre Cure Claim 3002.1(c) Amount	d ☐ Retained (I	Rate	Amount			\$1,857.03

Name of Holder / Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month#	Total
Harris County						
Wabash Trailer						
Treated under Plan Section: 11						
Check One: ☐ Surrendered ☐ Transferred ☐ Retained (paid direct) ☑ Retained (paid through Trustee)*						
Cure Claim						
3002.1(c) Amount						
Monthly Payment						
Total Debt Claim	\$1,000.00	12.00%	Pro-Rata	1	56	\$1,419.30
Monthly Refinance Payment (¶ 8B)						
_		Tota	l of Payments t	o Secured (Creditors	\$20,124.95

^{*} Amounts for Cure Claims, Monthly Payments, Total Debt Claims and Monthly Refinance Payments should be listed only if the box for "Retained (paid through Trustee)" is checked.

Projected Trustee Disbursements to Priority Creditors

Name of Holder / Nature of Priority (Taxes, Attorneys Fees, DSO, etc.)	Claim	Int. Rate	Monthly Payment Amount	Beg. Month #	End Month#	Total
Internal Revenue Service Taxes Treated under Plan Section: 6	\$20,103.00	0.00%	Pro-Rata	1	56	\$20,103.00
KEMSLEY LAW FIRM, P.L.L.C. Attorney Fees Treated under Plan Section: 6	\$2,890.00	0.00%	Pro-Rata	1	56	\$2,890.00
		Tot	al of Payments	to Priority (Creditors	\$22,993.00

Projected Trustee Reserve Funds

Reserve Fund Type (Ad Valorem Taxes, Insurance, HOA)			
HOA Fees (SG Owners Association, Inc.)	\$7,500.00		
Total of Reserve Funds	\$7,500.00		

SUMMARY

1	Total Payments to Trustee	\$59,180.00
2	Less Total Savings Fund Deposits	\$0.00
3	Net Trustee Payments (Line 1 minus line 2)	\$59,180.00
4	Less Posted Chapter 13 Trustee Fee	\$3,521.36
5	Less Total Payments by Trustee to Secured Creditors	\$20,124.95
6	Less Total Payments by Trustee to Priority Creditors (§§507(a)(1) - (a)(10))	\$22,993.00
7	Less Total Reserve Funds	\$7,500.00
8	Net Available for General Unsecured Creditors (Line 3 minus lines 4-7)	\$5,040.69

Unsecured Creditor Distribution Estimate

	9	Estimated Total General Unsecured Claims	\$231,722.91
ſ	10	Forecast % Dividend on General Unsecured Claims (Line 8 divided by line 9)	2%

Best Interest of Creditors Test

11	Total Non-Exempt Property	\$4,976.71
12	Total Distributions to Administrative, Priority and General Unsecured Creditors (Line 4 plus line 6 plus line 8 plus any direct payments by Debtor(s) under the Plan in satisfaction of prepetition priority claims)	\$31,555.05